

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

CPA  
09501876

## CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	48 minus 20 = *	28
INDEPENDENT CLAIMS	5 minus 3 = *	2
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY  
TYPE ☐

OR  
OTHER THAN  
SMALL ENTITY

RATE	FEE
BASIC FEE	370.00
X\$ 9=	
X42=	
+140=	
TOTAL	

RATE	FEE
BASIC FEE	740.00
X\$18=	504
X84=	168
+280=	
TOTAL	112

## CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**
	Independent	*	Minus	***
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY

OR  
OTHER THAN  
SMALL ENTITY

RATE	ADDI-TIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL	

RATE	ADDI-TIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**
	Independent	*	Minus	***
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDI-TIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL	

RATE	ADDI-TIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**
	Independent	*	Minus	***
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDI-TIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL	

RATE	ADDI-TIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

**This Form is for INTERNAL PTO USE ONLY**  
**It does NOT get mailed to the applicant.**

## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09/501 876

### Total Fee Calculation

Fee Code	Total # Claims	Number Extra	X	Fee	Fee	=	Total
				Sm. Entry	Lg. Entry		
Basic Filing Fee	201/101					=	690
Total Claims > 20	203/103	51	-20 =	31	X		18
Independent Claims > 3	202/102	6	-3 =	3	X		28
Multi. Dep Claim Present	204/104					=	
Surcharge	205/105					=	
English Translation	139					=	
<b>TOTAL FEE CALCULATION</b>							

Fees due upon filing the application:

Total Filing Fees Due = \$ 1612

Less Filing Fees Submitted - \$ 0

**BALANCE DUE** = \$ 1612

R. Washington  
Office of Initial Patent Examination

Figure 7